## BEST AVAILABLE COPY

								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective November 10, 1998										C	9/4	13	582	3
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAI		YIIIY	OR	OTHER	
FOR NUMBER FILED					NUMBER EXTRA			lſ	RATI	E	FEE	7	RATE	FEE
BASIC FEE					The second of th						380.00	OR		760.00
το	TAL CLAIMS		91	/ minus					X\$ 9	= (	643	OR	X\$18=	
IND	EPENDENT C		minus	3 = *				X39=		39	OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT									+130	_ †	121		+260=	····
* If	* If the difference in column 1 is less than zero, enter "0" in column 2										119	OR	TOTAL	
CLAIMS AS AMENDED - PART II													OTHER	THAN
	3 · · · · · ·	lumn 1) LAIMS		(Column 2) (		(Column 3)		SMALL		ENTITY OR		SMALL ENTITY		
ENT A	REM		MAINING FTER NOMENT	INING TER		NUMBER PRESENT PREVIOUSLY EXTRA PAID FOR			RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT</b>	Total	•	31	Minus	**	3!,	=		X\$ 9:	-		OR	X\$18=	7
AME	Independent	ATATI	4	Minus	***	4	=		X39=			OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130	.		OR	+260=	1
	,									AL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)								DDIT. F	t		3	ADDIT. FEE	
8			LAIMS MAINING			HIGHEST NUMBER	PRESENT	۱٢			ADDI-	1		ADDI-
MENDMENT		. A	FTER NDMENT		PRE	VIOUSLY ID FOR	EXTRA		RATE	Ţ	IONAL FEE		RATE	TIONAL FEE
Š	Total	•	31	Minus	**	31	•	<i> </i>	X\$ 9:	-		OR	X\$18=	
AME	Independent FIRST PRESE	*	ON OF M	Minus ULTIPLE DEI	PENDE	C/ NT/CLAIM	=	V[	X39=			OR	X78=	1
	<u> </u>		····					' [	+130=	-	_ /	OR	+260=	/
	•											OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		REA	LAIMS MAINING FTER	·	N	GHEST JMBER VIOUSLY	PRESENT EXTRA		RATE		ADDI-	1	RATE	ADDI- TIONAL
	_	_	NOMENT	<u> </u>		ID FOR		L		Ľ	FEE,		17.12	FEE
END	Total Independent	<u>ئے</u> ،	<u> </u>	Minus	**	44	=		X\$.9=		$\bot$	OR	X\$18=	
AM	FIRST PRESE	NTATI	ON OF M	Minus	PENDE	NT CI AIM	=		X39=		$\mathcal{T}$	OR	X78=	
۲								'   T	+130=	1		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the Triphest Number Previously Paid For IN THIS SPACE is less than 20 color "20"													TOTAL	
	If the "Highest Nu The "Highest Nun	mber Pi	reviously P	aid For IN THI	S SPAC	E is less tha	n 3. enter "3."	~	ODIT. FE d in the		nriato ba	•	ADDIT, FEE	
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